

ISSUE SLIP STAPLE AREA (for additional cross references)

BEST AVAILABLE COPY

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	T.D.		8/11/99
O.I.P.E. CLASSIFIER		12	8/11/99
FORMALITY REVIEW		605703	8-25-99

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Final	Original	Date
1	✓	✓	8/15/99
2	✓	✓	8/26/99
3	✓	✓	8/18/99
4	✓	✓	8/10/99
5	✓	✓	8/21/99
6	✓	✓	8/20/99
7	✓	✓	8/20/99
8	✓	✓	8/20/99
9	✓	✓	8/20/99
10	✓	✓	8/20/99
11	✓	✓	8/20/99
12	✓	✓	8/20/99
13	✓	✓	8/20/99
14	✓	✓	8/20/99
15	✓	✓	8/20/99
16	✓	✓	8/20/99
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25	✓	✓	8/20/99
26	✓	✓	8/20/99
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28	✓	✓	8/20/99
29	✓	✓	8/20/99
30	✓	✓	8/20/99
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42	✓	✓	8/20/99
43	✓	✓	8/20/99
44	✓	✓	8/20/99
45	✓	✓	8/20/99
46	✓	✓	8/20/99
47	✓	✓	8/20/99
48	✓	✓	8/20/99
49	✓	✓	8/20/99
50	✓	✓	8/20/99

Claim	Final	Original	Date
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions  
 staple additional sheet here